

Contractor Environmental Review Completion Form

Agency Name ___NJ Department of Community Affairs (DCA)

CDBG-DR Program _Reconstruction, Rehabilitation, Elevation and Mitigation

Application ID Number _ RRE0006556MF_____

Applicant Name __William Ryan. (Business/Corporate Name)

Project Location __2 South Montgomery Avenue, Apt 1 (Address)

_____ Atlantic City (Municipality)_____Atlantic_____(County)

__213_____(Block)_____7_____(Lot)

I certify that I have reviewed this Environmental Review Record for completeness and quality of forms and documentation.

Dewberry, Senior Planner_

_____Lawrence I. Smith_____

Title

Name

_3/23/2015 _____



Date

Signature